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PTO/SB/21 (08-00)

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

| Application Number | 09/456,042 |
|------------------------|-------------------|
| Filing Date | December 6, 1999 |
| First Named Inventor | Bonner, Robert F. |
| Group Art Unit | 1641 |
| Examiner Name | G. Gabel |
| Attorney Docket Number | 015280-347100US |

| ENCLOSURES (check all that apply) | | | | | | |
|---|---------------------------------------|--|--|---|--|--|
| Fee Transmittal Form | | Assignment Papers (for an Application) | | After Allowance Communication to Group | | |
| Fee Attached | | ☐ Drawing(s) | | Appeal Communication to Board of Appeals and Interferences | | |
| Amendment / Reply | | Licensing-related Papers | | Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) | | |
| After Final | | Petition | | Proprietary Information | | |
| ☐ Affidavits/declaration(s) | | Petition to Convert to a Provisional Application | | Status Letter | | |
| Extension of Time Request | | Power of Attorney, Revocation Change of Correspondence Address | | Other Enclosure(s) (please identify below): | | |
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| Certified Copy of Priority Document(s) | | Remarks | The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430. RECEIVED | | | |
| Response to Missing Parts/ Incomplete Application | | DEC 0 3 2002 | | | | |
| Response to Missing Parts under 37 CFR 1.52 or 1.53 | | TECH CENTER 1600/290 | | | | |
| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | | | | | | |
| Firm | | | | | | |
| and Individual name | William Michael Hynes Reg. No. 24,168 | | | | | |
| Signature | William Mehael Hypo | | | | | |
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Patent fees are subject to annual revision.

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Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

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|----------------------|-------------------|----------------------|
| Application Number | 09/456,042 | |
| Filing Date | December 6, 1999 | RECEIVE |
| First Named Inventor | Bonner, Robert F. | DEC 0 3 2002 |
| Examiner Name | G. Gabel | |
| Group Art Unit | 1641 | TECH CENTER 1600/29h |

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| SUBMITTED BY | | | | | Complete (if applicable) |
|-------------------|-----------------------|-----------------------------------|--------|-----------|--------------------------|
| Name (Print/Type) | William Michael Hynes | Registration No. (Attorney/Agent) | 24,168 | Telephone | 415-576-0200 MM |
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